

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of Lynn Allen-Hoffmann and John M. Centanni for Species Specific DNA Detection.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date **August 1, 2003** in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **EV 329 479 405 US** addressed to: **Box Patent Application**, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Susan M. McClintock

1. **Type Of Application**
This new application is for a(n)
☒ Original (nonprovisional)
2. **Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application**
35 Pages of Specification
5 Pages of Claims
1 Page of Abstract
0 Sheets of Informal Drawings
3. **Declaration**
☒ Enclosed
☒ Unexecuted.
4. **Inventorship Statement**
The inventorship for all the claims in this application is:
☒ the same
5. **Language**
☒ English
6. **Fee Calculation (37 C.F.R. § 1.16)**
☒ Regular application

CLAIMS AS FILED

Number Filed	Number Extra	Rate	Basic Fee - \$750.00 (37 C.F.R. § 1.16(a))
Total Claims (37 C.F.R. § 1.16(c))	37 - 20 =	17 × \$18.00 =	\$306.00
Independent Claims (37 C.F.R. § 1.16(b))	3 - 3 =	0 × \$84.00 =	\$0.00
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))	+ \$280.00 =		\$0.00

Filing Fee Calculation \$1,056.00

7. **Small Entity Statement(s)**
☒ Verified Statement(s) that this is a filing by a small entity under 37 C.F.R. §§ 1.9 and 1.27.

Filing Fee Calculation (50% of above) \$528.00

8. **Fee Payment Being Made At This Time**

- ☒ Enclosed
☒ basic filing fee

\$528.00

Total Fees Enclosed \$528.00

9. Method of Payment of Fees

☒ Check in the amount of \$528.00

10. Authorization To Charge Additional Fees and Credit Overpayment

☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No.: 08-1290. An originally executed duplicate of this transmittal is enclosed for this purpose.

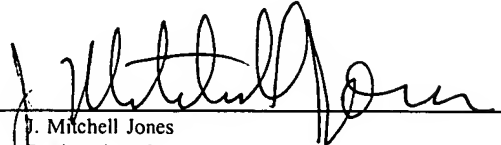
11. Power of Attorney by Assignee

☒ Enclosed (unexecuted)

12. Return Receipt Postcard

☒ Enclosed

Dated: August 1, 2003


J. Mitchell Jones
Registration No.: 44,174

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☒ Statement Where No Further Pages Added

☒ This transmittal ends with this page.